



HOW TO SUBMIT MEMBERSHIPS ELECTRONICALLY AND GENERAL MEMBERSHIP INFORMATION

Checklist Before You Can Participate Electronically:

- You must have Internet access, email and attachment capability.
- You must have Excel software to submit NEW members electronically.
- You must the have the Member ID number on RENEWING members electronically.

General Membership Facts:

The Arc Tennessee processes memberships the last full week of every month. Membership files must be emailed or received by the 20th of each month to be entered within that month. Reports are generated and sent back to membership processors for review. Errors should be immediately reported to The Arc Tennessee Membership Office.

New expiration dates must correspond with the month the renewal is submitted, keeping in mind renewals sent in after the 20th will not be processed at the state level until the next month. If you email your file(s) after the 20th, use the next month on new expiration dates. (Example: A renewing member was due to renew March 31, 2003 but it is June 19 when the file is being transmitted. The new expiration date should be June 30, 2004, not March 31, 2004. Should this file not be emailed until June 24th, the new expiration date should be July 31, 2004.) For uniformity and compliance with data requirements, corrections in expiration dates will be made at the state level. Read your reports.

The Arc Tennessee charges \$2 per member. Check amounts should correspond with the number of members submitted.*

***Note: Beginning January 2013, the membership fee will reduce to \$1 per member and chapters will be invoiced in 2014 for their 2013 year-end membership totals. (Chapters will no longer have to submit checks monthly, only once a year. Membership fees will be invoiced along with affiliation fees.)**

Email all files to: pcooper@thearctn.org

Renewing Members Instructions

Membership renewals are the easiest. The only information needed to renew members is:

1. First Name

2. Last Name*
3. Member ID Number*
4. New Expiration Date - it must be the last day of the month
5. Email address (if you capture it)

*REQUIRED – Read and keep those quarterly rosters!

Please use the above headings in an Excel file and fill in your member information. **Name it your chapter number, renew, and the date you are sending. (Example: 754renew061903.xls).**

First Name	Last Name	Member ID Number	New Expiration Date	Email
Peggy	Cooper	06334A	07/31/04	pcooper@thearctn.org

Email to pcooper@thearctn.org and attach the Excel file. **Subject Line of Email: Renewals for (Chapter Name and Number)**

New Members Instructions

You must contact The Arc Tennessee office to receive the Excel file template. You must use the Excel file format supplied to you. The information must be in that order.

Information needed as follows:

1. The Excel file has column labels. Fill in one line per new member. If a particular member has no information for a field, simply leave it blank, but do not delete the column. Do not change the names of the headers or change the order of the headers.

2. Name the file in Excel according to the following pattern: **Name of your chapter, the word NEW and the month and year in which you are submitting. (Example: Davidson Co. NEW 0603.xls)**

3. Please do not delete any columns or change the order of the columns. If there are fields you do not track information for just leave them blank. Do not enter information in the two shaded columns of "Date Entered" and "Member ID." Leave those blank. They will be completed by The Arc Tennessee.

4. Please pay close attention to the distinction between a renewal and a new member, including ONLY NEW MEMBERS in this file.

5. Field Explanations on NEW Members Template: (*All fields with an asterisk * must be completed for each member!) Please leave shaded columns blank. That information will be entered here.

*Last Name - self-explanatory (If you are entering an organization or business, put the entire name in last name field.)

*First Name – Self-explanatory

***Company – This is where the company's or organization's**

*Address – Street Address or PO Box

Sec-address – Most information can go into Line 1 but use Line 2 if needed

*City – Self-explanatory

*State - Please use the two-digit postal code abbreviation (Example: TN)

*Zip-Code - Please provide correct zip (plus four if known Example: 37072-9672) If you do not know the zip code, go to <http://zip4.usps.com/zip4/welcome.jsp> and look it up!

Date Entered – Leave this shaded field blank! Date entered will be completed at the state level.

*Expiration Date – Enter the date the membership will expire. Always use the last day of the month in which you are submitting (Example 1/31/09)

Member ID – Leave this shaded field blank! Membership ID numbers will be assigned at the state level.

*Chapter # - Enter your local chapter number (Example 618)

*Chapter – Enter your county (or name of your chapter if you don't go by county name, example: Mid-South.) Do not put "The Arc of"

*Resides In – Enter the county the new member lives in (Example: Washington) This field is very important because although someone may belong to The Arc of Washington County, they may reside in Greene or Carter County. We need to capture this information correctly.

*Type – Enter N. (Stands for new)

*Amount – Enter the amount of dues this member pays you for their membership. This is another very important field and for those of you who use the national invoicing system, this is the amount The Arc US will bill the member for at renewal time.

Phone – Self-explanatory. If unknown, leave blank.

*Connection Mail – Enter either Y for yes or N for no on whether or not this member wishes to receive The Arc Connection newsletter.

*Monitor Mail – Either enter Yes or No on whether or not this member wishes to receive The Legislative Monitor newsletter.

*Member Since – Enter the last day, month and year when submitting (Example: 1/31/08)

Email address – Enter the member's email address. If unknown, leave blank.

Classification - Please use the following five categories. If you do not have this information, leave the field blank.

Self-Advocate
Interested Citizen

Professional
Parent

Age Group Member - Please use the following categories. We encourage you to collect and pass on this information. Leave it blank if you do not know this information.

1-24
25-34
35-44
45-54
55-65
66+

Age Group Person With MR – Enter if known using the following categories. If you do not know, leave blank.

1-24
25-34
35-44
45-54
55-65
66+

Attach file and email to pcooper@thearctn.org

Changes Instructions

Please use the Changes Template to send in the following type changes. Please name the file using this format: CHANGES-chapter number-date (CHANGES-522-01.31.12). Put subject line as Membership Changes.

- Name Changes
- Address Changes
- Corrections to Misspellings

Attach file and email to pcooper@thearctn.org

06/12